

EXHIBIT D(I)

HOME PROJECT SUMMARY

I. A. APPLICANT INFORMATION

Name _____

Current Address _____

City _____ State _____ Zip _____

Contact Person _____ Telephone No. _____

Federal ID or Social Security Number _____

B. HOUSEHOLD CHARACTERISTICS

(i) Number of Bedrooms (Check One):

_____ 0 Bedrooms	_____ 3 Bedrooms
_____ 1 Bedroom	_____ 4 Bedrooms
_____ 2 Bedrooms	_____ 5 or more bedrooms

(ii) Monthly Gross Income of Household: \$ _____

(iii) Household Data

(a) Race/Ethnicity of Head of Household (check one):

_____ White	_____ Black/African American
_____ Asian	_____ American Indian/Alaskan Native
_____ Hispanic	_____ Native Hawaiian/Other Pacific Islander
_____ Asian & White	_____ American Indian/Alaskan Native & White
_____ Other Multi-racial	_____ Black/African American & White
_____ American Indian/Alaskan Native & Black/African American	
_____ Asian/Pacific Islander	

(b) Type of Household (check one):

_____ Single/Non-Elderly	_____ Related/Two Parent
_____ Elderly	_____ Other
_____ Related/Single Parent	

(c) Number of members of Household*: _____

*Household includes all persons occupying the Residential Housing Unit.

C. FINANCIAL STRUCTURE OF PROJECT

Does Project Involve (Check One)

(1) ☐ New Construction (2) ☐ Acquisition Only (3) ☐ Rehabilitation & Refinancing

II. DESCRIPTION OF RESIDENCE TO BE PURCHASED:

A. Site Address:

City: _____ State: _____ ZIP: _____ Census Tract: _____

B. Residence Components:

Purchase Price of Residence \$ _____

Construction or Rehabilitation Costs (If Applicable) \$ _____

TOTAL RESIDENCE COSTS: \$ _____

C. Number of Living Units: _____

D. If any unit is tenant occupied, specify name and phone number of tenant:

Name: _____

Phone: _____

Year Residence was Built: _____ If the residence was constructed prior to 1978, either (i) a visual assessment of the residence by a person trained to identify deteriorated paint must state in writing that the residence contains no lead-based paint hazards or (ii) if lead-based paint hazards have been identified, a Clearance Inspection Report by a certified risk assessor or clearance technician must state that all lead-based hazards have been eliminated.

III. APPRAISAL

A. Appraisal of residence:

(i) Date of Appraisal _____

(ii) Appraised Value \$ _____

(iii) 203(b) Mortgage Limit \$ _____

(iv) Subtract (ii) from (iii): \$ _____ *

* The difference must be "0" or greater.

B. Appraisal performed by: _____

IV. COMPUTATION OF MINIMUM INCOME AND MINIMUM CASH REQUIRED

Compute and enter Minimum Income and Minimum Cash Required from **Attachment I**

A. Minimum Income Requirement: \$ _____

B. Applicant's Income
(Must equal or exceed A): \$ _____

C. Minimum CASH Required \$ _____

V. **COMPUTATION OF HOUSEHOLD INCOME**

Complete the Household Income Certification attached as **Attachment II**

Annual Income from **Attachment II - #7** \$ _____

PROJECT SUMMARY
(EXECUTION AT TIME OF LOAN APPLICATION)
(add additional signature lines if necessary)

Signed, sealed and delivered in the

Presence of _____,

On this _____ day of _____, 20____.

_____ Notary Public	L.S.	_____ Mortgagor
_____ Notary Public	L.S.	_____ Mortgagor
_____ Notary Public	L.S.	_____ Mortgagor

(EXECUTION AT CLOSING)
(add additional signature lines if necessary)

Signed, sealed and delivered in the

Presence of _____,

On this _____ day of _____, 20____.

_____ Notary Public	L.S.	_____ Mortgagor
_____ Notary Public	L.S.	_____ Mortgagor
_____ Notary Public	L.S.	_____ Mortgagor

ATTACHMENT I to Exhibit D(1)

COMPUTATION OF MINIMUM INCOME AND MINIMUM CASH

1. Sales Price of the Residential Housing Unit.

- (a) Enter maximum mortgage loan amount for FHA Section 203(b) mortgage issuance program for jurisdiction in which the Residential Housing Unit is located. \$ _____
- (b) Enter appraised Value of the Residential Housing Unit \$ _____
- (c) Enter Sales Price of the Residential Housing Unit from the Purchase Agreement \$ _____
- (d) Is the amount entered in 1(c), above, less than each of the amounts entered in 1(a) and 1(b), above. Yes ____ No ____
(Answer must be "Yes" or Residential Housing Unit is disqualified)

2. Minimum Income Required to Qualify for Mortgage Loan.

- (a) Enter maximum Mortgage Loan principal amount
- Sales Price (from 1 (c), above) \$ _____
- Maximum First Mortgage (LTV) x _____ % *
- Maximum First Mortgage Loan \$ _____

*Specify the underwritten percentage.

- (b) Compute PITI on Maximum First Mortgage Loan.

Level Monthly PI Payment (30 Years) @ _____ % \$ _____

Monthly Property Tax Escrow Payment \$ _____

Monthly Hazard Insurance Escrow (including flood Insurance if required) \$ _____

PMI/MIP \$ _____

TOTAL Monthly PITI \$ _____

Compute Minimum Income Requirement

TOTAL PITI (from 2(b), above) \$ _____

Multiply by factor applicable to Mortgage Loan x _____ (factor)

Minimum Income Requirement \$ _____

3. Borrower Minimum Cash Required to Close.

- (a) Enter Sales Price (from 1(c), above) \$ _____
- (b) Multiply by Factor required by Mortgage Loan type x _____ % factor)
- (c) Enter Product \$ _____
- (d) Enter Minimum Cash required to close \$ _____

ATTACHMENT II TO Exhibit D (1)
HOUSEHOLD INCOME CERTIFICATION WORKSHEET

The information requested below must be provided with respect to all individuals who are expected to live in the residence being financed.

PART I - General Information

Lender:	
Loan No.:	
Mortgagor(s) Name(s):	

PART II - Summary of Household Income Data

1. Name		2. Identification			
ASSETS					
Household Member	Asset Description	Current Cash Value	Income from Assets		
3. Total Net Household Assets		3. \$			
4. Total Actual Asset Income			4. \$		
5. If line 3 is greater than \$5000, multiply line 3 by Passbook Rate and enter result here; otherwise leave blank			5.		
ANTICIPATED ANNUAL INCOME (List all household members regardless of income)					
Household Member	a. Wages/ Salaries	b. Benefits/ Pension	c. Public Assistance	d. Other Income	e. Asset Income
					Enter the greater of lines 4 or 5 From above in e.
6. Totals	a. \$	b. \$	c. \$	d. \$	e.
7. Enter total of items from 6a. through 6e. This is <i>Annual Income</i>				7. \$	

ATTACHMENT III to Exhibit D(1)

HOME PROJECT SUMMARY

APPLICATION CERTIFICATION

Under penalty of perjury, the undersigned Applicant or duly authorized representative of the same hereby certifies that the information contained in this HOME Project Summary (EXHIBIT D), including all Appendices, Attachments and Exhibits attached hereto, is complete and accurate as of the date hereof.

The Applicant represents that he/she will furnish promptly such other supporting information, documents and fees as may be requested and/or required. The Applicant agrees to comply with all applicable federal and state laws regarding unlawful discrimination, will comply with all HOME Program requirements and restrictions and will abide by all LHFA rules and regulations. The Applicant understands and agrees that LHFA is not responsible for actions taken by the Applicant in reliance on a prospective commitment of HOME Program funds by LHFA and the Applicant further agrees that LHFA, its employees, agents and/or consultants shall not be responsible or liable in any manner whatsoever for expenses incurred by Applicant or its consultants in applying for HOME Program funds. By execution of the Application, the Applicant understands and agrees that LHFA may conduct its own independent review and analysis of the information contained herein and in the attachments hereto, that any such review and analysis will be made for the protection of LHFA. The Applicant acknowledges that submission of the HOME Project Summary Package to LHFA in no way binds LHFA to commit HOME Program funds to the Applicant. The Applicant further acknowledges that any prospective commitment of HOME Program funds is subject to and made conditional upon the Applicant complying with all terms and conditions under which the commitment of HOME Program funds may be made, including but not limited to compliance with 24CFR Part 92, Subpart H.

The Applicant agrees to hold LHFA, its employees, agents and/or consultants harmless in connection with any claims of damage which may be filed by the Applicant based upon the processing of this Application by LHFA or its agents, employees and/or consultants.

The Applicant further agrees to execute the forms of notes, mortgages, regulatory agreements and such other documents, agreements and/or certificates as may be required by LHFA to administer the HOME Program.

Name of Applicant

By: _____

Date: _____

Sworn to and subscribed before me this
____ day of _____, 20____.

Notary Public, State of _____